Diene Farmer 1316 Shelmere Que Thila., Oal 9111 1,03 2 0 2003 215-728-7328 August 14,2003 Dear Valerie Kienard. Regarding our conversations on the week of July 08 th about my messing declaration page, have I have checked my records. Accordingly I have found it was sent with my organal papers. Cuclosed is a declaration page copy. Blease advise me about my standing as soon as posseble. Wo Dam sure you can imagine Dane very fustiated. Thankyou. Sincerely! Siene Farmer

Application #09/934,516 Confirmation # 7754

CC. James Johnson

AUS 2 0 2003

Under the Paperwork Reduction Apply 985 no person large	required to respond to a	U.S. Patent and Trademark Office	PTO/SB/01 (03-01) use through 10/31/2002, OMB 0651-0033 e; U.S. DEPARTMENT OF COMMERCE s it contains a valid OMB control number
DECLARATION — Utility or D sign Patent Application			
Direct all correspondence to: Customer Num or Bar Code La		OR X C	Correspondence address below
Name Irene Farmer			
Address 1316 Shelmine Ave			
chy Phila		State Pa	ZIP /9///
Country United States of Am Te	llephone <i>柔ば</i> ・	- 728 - 7328	Fax Same
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor			
Given Name Family Name Farmer or Surname			
Inventor's Drene Farmer Signature			Date
Residence: City Philadelphia	State Pa	Country USA	Citizenship USA
Malling Address 1316 Shelmine Ave			
cmy Philadelphia	State Pa	ZIP 19111	Country USA
NAME OF SECOND INVENTOR:	A petition has	s been filed for this unsi	gned inventor
Given Name first and middle [if any]) Family Name or Surname			
nventor's Signature			Date
Residence: City	State	Country	Citizenship
falling Address			
City	State	ZIP	Country
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			